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CONFIRMATION NO. 4540

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|---|---|---|------------------------|------------------------------------|
| SERIAL NUMBER 10/541,257 | FILING OR 371(c) DATE 01/09/2006 RULE | CLASS 435 | GROUP ART UNIT 1639 | ATTORNEY DOCKET NO. AMLN-047 |
| APPLICANTS Gerd G. Kochendoerfer, Oakland, CA; Haiyan Shao, Foster City, CA; Sonya Cressman, Ladysmith, CANADA; | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/US03/41459 12/30/2003 which claims benefit of 60/437,511 12/30/2002 and claims benefit of 60/515,609 10/29/2003 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/30/2006 | | | | |
| Foreign Priority claimed | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 5 | TOTAL CLAIMS 26 |
| 35 USC 119 (a-d) conditions met | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | INDEPENDENT CLAIMS 5 |
| Verified and Acknowledged | Examiner's Signature <i>T. D. S.</i> | Initials <i>T. D. S.</i> | | |
| ADDRESS 24353 | | | | |
| TITLE Multiplex polymer ligation | | | | |
| FILING FEE RECEIVED 1830 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |